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CONFIRMATION NO. 5784

SERIAL NUMBER 10/665,152	FILING OR 371(c) DATE 09/22/2003 RULE	CLASS 623	GROUP ART UNIT 3738	ATTORNEY DOCKET NO. A8130.0140/P140
<b>APPLICANTS</b> Reinhold Schmieding, Naples, FL;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/412,028 09/20/2002 <i>4-15-07</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>None</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 12/11/2003				
Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY FL	SHEETS DRAWING 5	TOTAL CLAIMS 14
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after <i>Allowance</i>			INDEPENDENT CLAIMS 5
Verified and Acknowledged <i>John</i>	Examiner's Signature <i>John</i>	Initials		
<b>ADDRESS</b> 24998				
<b>TITLE</b> Method and instrumentation for osteochondral repair using preformed implants				
FILING FEE RECEIVED 459	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		